



GIFT & PLEDGE FORM

I (we) hereby pledge cash and/or assets to Lane Community College Foundation.

Donor Name (s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (Home): _____ (Work): _____ Email: _____

Check here if you would prefer that your name not be listed in a published list of donors

TOTAL AMOUNT OF GIFT OR PLEDGE: \$ _____ to Area of greatest need OR

Other: _____

Amount enclosed \$ _____

Check payable to Lane Community College Foundation

Visa/ MasterCard/American Express/Discover (Circle One) Billing address same as above

Card # _____ Exp. Date _____ Name on Card _____

PLEDGE PERIOD: _____ years **or** **ONE-TIME GIFT:**

Payments of \$ _____ will begin on _____ (date) and continue

Monthly, Semi-Annually, Quarterly, or Annually

Please charge each payment to the credit card provided above: Yes No

MEMORIAL OR HONORING GIFT (Optional)

This gift is given in memory of or in honor of: _____

Name of person to notify of memorial: _____

Address: _____

Home phone: _____ E-mail: _____

Donor Signature

Date

Tax receipts will be issued by Lane Community College Foundation once payment is made. Thank you so much for your generosity and support of Lane Community College Foundation!

Please RETURN THIS FORM to: Lane Community College Foundation, 4000 East 30th Avenue, Eugene, OR 97405-0640 or fax to (541) 463-3985.



FOR INTERNAL USE ONLY:

Fund Name _____

Need New Fund? Yes No

Scholarship Agreement attached? Yes No

No signature/the information is per phone/email conversation with (Staff) _____

Campaign _____

Appeal _____

Staff _____

Notes for RE _____

Pledge form date _____ Initials _____ Entered in RE _____ Initials _____ Date _____